# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF WEST VIRGINIA

Francis Nekvasil Kimberly Goodson	Reg. No. 11525-040 Reg. No. 07658-032
(Enter above the full name of the plaintiff or plaintiffs in this action).	(Inmate Reg.# of each Plaintiff)
VERSUS CIVIL /	er to be assigned by Court)
Neil Rehberg (Clinical Director)  James A. Blankenship (Health Service A	dministrator) FILED APR 2 7 2006
Deborah Hickey (Warden)	TERÉSA L. DEPPNER, CLERK
Morice Meeghagen (Captain)  (Enter above the full name of the defendant or defendants in this action).	U.S. District Court

### COMPLAINT

#### I. Previous Lawsuits

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?

Yes \_\_\_\_ No \_\_\_\_\_\_

If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).		below. (If there is more than one lawsuit, describe diditional lawsuits on another piece of paper, using the
	1.	Parties to this previous lawsuit
		Plaintiffs:
		Defendants:
	2.	Court (if federal court, name the district; if state court, name the county):
	3.	Docket Number:
	4.	Name of judge to whom case was assigned:
	5.	Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)
	6.	Approximate date of filing lawsuit:
	7.	Approximate date of disposition:

H.	Place	lace of Present Confinement: Alderson Federal Prison Camp		
	A. Is there a prisoner grievance procedure in this institution?			
		Yes <u>xx</u> No		
	В.	Did you present the facts relating to your complaint in the state prisoner grievance procedure?		
		Yes No		
	C. If your answer is YES:			
		1. What steps did you take?		
		2. What was the result?		
	D.	If your answer is NO, explain why not: Because the Administrative Process		
		Does NOT work! My Attorney advised me NOT to do it!		
III.	Parti	ies		
	(In item A below, place your name and inmate registration number in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)			
	A.	Name of Plaintiff: Francis Nekvasil (Reg. No. 11525-040)		
		Address: Alderson, West Virginia		
	B.	Additional Plaintiffs and Address: Kimberly Goodson (Reg. No. 07658-		
		Alderson, West Virginia		

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

is employed as Clinical Director
at ROP Alderson, West Virginia
Additional defendants: James A. Blankenship (Health Service Admin BOP Alderson, West Virginia, Deborah Hickey (Warden BOP Alderson West Virginia, Morice Meeghagen (Warden BOP Alderson, West Virginia)
BOP Staff Of Alderson, West Virginia

#### IV. Statement of Claim

State here as briefly as possible the <u>facts</u> of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheet if necessary).

Prison officials have been deliberate indifference to serious medical needs and or ATTENPION: Inadequate prison health care rises to violation of Eighth Amendment Rights. Right to medical treatment is found in due process clause or in equal protection clause! I also have a right to be free from cruel and unusual punishment. There is a pettern of repeated negligent acts by prison officials and medical staff of such systematic and gross deficiencies in staffing, facilities, equipment or procedures as to deny medical care for myself and other inmates access to adequate medical care. Under Eighth Amendment

it is stated when prison officials intionally deny access to medical care or interference with proscribed treatment of prisioners is clearly in violation

of Eighth Amendment Rights! Alderson DOES NOT have wheel chair access and I am on a walker so therefore I am denied access to facilities such as the

## IV. Statement of Claim (continued):

Legal Library, Chapel, Commissary, and most of all health service Dept.
And Psychology Dept. also. I have been threatened by BOP staff (The Captain Mr. Meeghagen) He was going to teach me a lesson if I did NOT shut my mouth and stop my attorney from calling in here asking questions! Psychology Department was also asked to falsify documents on myself and Kimberly goodson to state
we were suicidal and homicidal. Psychology Department told both of the inmates they wanted no part of such an act and valued their jobs and career. I am in
desperate need of health care for my knees and diabetes. After approching health care staff for needed care I was locked up in the suicide room for several days with out reading materials and or adequate access to telephone, personal property, and shower and bathroom facilities without someone present while I used the bathroom This is clearly cruel and unusual punishment and violates
my Eighth Amendment Rights.
V. RELIEF  State briefly exactly what you want the court to do for you. Make no legal
arguments. Cite no cases or statutes.
I am asking that the court see fit to allow me to do the remainder of my
incarceration on home confinement. Since the BOP refuses to sent me to an adequate facility for medical care of serious medical needs and or treatment. BOP staff refuses my needed pain medications. At home I could provide the adequate needed medical care I desperate needed.  I could go to my family doctors who would not have to refer to a medical book concerning my medical needs and concerns. They were already familiar with my medical needs and concerns. I am also asking for punitive damage for the emotion distress I have suffered at the hands of these BOP Officials.

V. Re	lief	(continued)
		, , , , , , , , , , , , , , , , , , ,
VII.	Co	unsel
	A.	If someone other than a lawyer is assisting you in preparing this case, state the person's name:
	В.	Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?
		Yes <u>XX</u> No
		If so, state the name(s) and address(es) of each lawyer contacted:
		Craig Sokolow LLM
		Philadelphia, PA 19103 If not; state your reasons!
	C.	Have you previously had a lawyer representing you in a civil action in this court?
		Von No YVV

If so, state the lawyer's r	name and address:
Signed this $24$ day of	April 106. Francis A Nekvas
	Signature of Plaintiff or Plaintiffs
I declare under penalty of pecorrect.	erjury that the foregoing is true and
Executed on(D	1 <u>24,2006</u> ate)
	Tancis A. Kekvas.   Signature of Movant/Plaintiff
iture of Attorney /)	

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